

Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1

of 12

Complete if Known

| | |
|------------------------|----------------------|
| Application Number | 10/822,546 |
| Filing Date | April 12, 2004 |
| First Named Inventor | Mark J. Whalen et al |
| Art Unit | 3763 |
| Examiner Name | Jeffrey G. Hoekstra |
| Attorney Docket Number | 25064/104/102 |

U. S. PATENT DOCUMENTS

| Examiner Initials* | Cite No. ¹ | Document Number Number-Kind Code ² (If known) | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
|--------------------|-----------------------|---|--------------------------------|--|---|
| | | US- 4932938 | 06-12-1990 | Goldberg et al. | |
| | | US- 4973301 | 11-27-1990 | Nissenkorn | |
| | | US- 5096454 | 03-17-1992 | Samples | |
| | | US- 5234409 | 08-10-1993 | Goldberg et al. | |
| | | US- 5322501 | 06-21-1994 | Mahmud-Durrani | |
| | | US- 5746720 | 05-05-1998 | Slouder, Jr. | |
| | | US- 5785641 | 07-28-1998 | Davis | |
| | | US- 5846259 | 12-08-1998 | Berthiaume | |
| | | US- 6179827-B1 | 01-30-2001 | Davis et al. | |
| | | US- RE35849 | 07-14-1998 | Soehendra | |
| | | US- | | | |

FOREIGN PATENT DOCUMENTS

| Examiner Initials* | Cite No. ¹ | Foreign Patent Document Country Code ² -Number ⁴ -Kind Code ⁵ (If known) | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear | T ⁶ |
|--------------------|-----------------------|--|--------------------------------|--|---|----------------|
| | | EP 0 266 091 A2 | 05-04-1988 | City of Hope National Medical Cen | | |
| | | WO 98/00192 A1 | 01-08-1998 | Urocaht Corporation | | |
| | | WO 98/05268 A1 | 02-12-1998 | Cohen et al. | | |
| | | WO 98/37834 A1 | 09-03-1998 | Applied Medical Resources C | | |
| | | WO 99/08741 A1 | 02-25-1999 | AbbeyMoor Medical, Inc. | | |

| Examiner Signature | Date Considered |
|--------------------|-----------------|
| | |

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.³ Applicant's unique citation designation number (optional). ² See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). For Japanese patent documents, the indication of the year or the reign of the Emperor must precede the serial number of the patent document. ⁴Kind of document by the appropriate symbol as indicated on the document under WIPO Standard ST.16 if possible. ⁵Applicant is to place a check mark here if English language translation is attached to the document. ⁶Indicates if reference is a prior art reference.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (or by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Complete if Known

| | | | |
|--|---|------------------------|---|
| Substitute for form 1449/PTO | | | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT | | | |
| (Use as many sheets as necessary) | | | |
| Sheet | 2 | of | 2 |
| | | Attorney Docket Number | |
| | | 25064/104/102 | |

NON PATENT LITERATURE DOCUMENTS

| Examiner Initials* | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
|--------------------|-----------------------|---|----------------|
| | | EPO Supplementary European Search Report under Art. 157 (2)(a) EPC Appl. No. 02702085.8 | |
| | | EPO Supplementary European Search Report under Art. 157 (2)(a) EPC Appl. No. 02789236.3 | |
| | | EPO Communication pursuant to Art. 96(2) EPC Appl. No. 02702085.8 | |
| | | EPO Communication pursuant to Art. 96(2) EPC Appl. No. 02789236.3 | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | |
|--------------------|-----------------|
| Examiner Signature | Date Considered |
|--------------------|-----------------|

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.